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## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number

10/751682

|  |  | CLAIMS A                                       | (Column 1)    |                | (Column 2)   |                     |      | SMALL ENTITY TYPE |                     |             | OTHER THAN          |              |  |
|--|--|--|---------------|----------------|--------------|---------------------|------|-------------------|---------------------|-------------|---------------------|--------------|--|
| TO   | OTAL CLAIMS  |  | Colonia       | <u></u>        | 199.0        |                     |      | RATE              | FEE                 | 7           | RATE                | FEE          |  |
| _  | DR·  |  | NUMBER FILED  |                | NUMBER EXTRA |                     |      | BASIC FEE         | <del> </del>        |             | BASIC FEE           |              |  |
| <b> </b>   |  | <del></del>                                    | NUMBER        | NOMBER FILED   |              |                     |      |                   | <del> </del>        | <b>1</b> "" |                     |              |  |
| TC   | TAL CHARGE   | min  | minus 20=     |                |              |                     | x 25 |                   | OR                  | X-50        |                     |              |  |
| INC  | DEPENDENT C  | LAIMS  | ninus 3 =     |                |              |                     |      | x100              |                     | OR          | ×200                |              |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |  |  |               |                |              | <u>.</u>            |      | 6.160             |                     | OR          | 12/0                |              |  |
| * If the difference in column 1 is less than zero, enter |  |  |               |                |              | xolumn 2            |      | F/80<br>TOTAL     |                     | OR          | 1700                |              |  |
| "  |  |  | MENDE         | DAD'           | T ()         |                     |      | ·                 |                     | J ~''       | OTHER               | THAN         |  |
| مک   | 246 Of CLAIMS AS AMENDED - PA  |  |               |                |              | (Column 3)          | •    | SMALL             | ENTITY              | OR          | SKALL               |              |  |
| _  | 1  | CLAIMS   |               | HiGH           | EST          |                     |      |                   | ADDI-               |             |                     | ADDI         |  |
| AMENDMENT A  | REMAINING  |  | }             | PREVIO         |              | PRESENT<br>EXTRA    | 1 1  | RATE              | TIONAL              | 1.          | RATE                | TIONA        |  |
|  | ·  | AFTER<br>AMENDMENT                             | i             | PAID           |              | EAIRA               |      |                   | FEE                 |             | . <.(.              | FEE          |  |
|  | Total  | · 202.   | Minus         | -2             | 3            | = .                 |      | x 25              |                     | OR          | ×50.                |              |  |
| MEN  | Independent  | · A  | Minus         | ***            | <b>5</b>     | Ε                   |      | ×100              |                     | OR          | x200                |              |  |
| ۷  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |               |                |              |                     |      |                   |                     |             | . 242               |              |  |
|  |  |  |               |                |              |                     |      | +180              |                     | OR          | +360                |              |  |
|  |  |  |               |                | ,            | TOTAL<br>4001T, FEE |      | OR                | TOTAL<br>ADDIT. FEE |             |                     |              |  |
|  |  | (Column 1)                                     |               | (Colun         | nn 2)        | (Column 3)          |      |                   |                     |             |                     |              |  |
|  |  | CLAIMS   | T             | HIGH           |              | 1000                | 1 1  | -                 | ADDI-               |             |                     | ADDI-        |  |
| 8  |  | REMAINING                                      |               | NUM8<br>PREVIO |              | PRESENT<br>EXTRA    |      | RATE,             | TIONAL              |             | RATE                | TIONA        |  |
| 늘  |  | AFTER  |               | PAID           | FOR          | EXIM                |      |                   | FEE.                |             |                     | FEE          |  |
| NOW  | Total  | `  | Minus         | 1-a            | 1            | =                   |      | x 25              |                     | OR          | x50                 |              |  |
| 2 4 4 4  | independal   | ;  | Minus         | \$3%           |              |                     |      | × 100             |                     | OR          | 1200                |              |  |
| AR   | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |  |               |                | CLAIM        |                     | ] }  | X/00              |                     | 0.1         |                     |              |  |
|  | L  |  |               |                |              | •                   | `    | +180              |                     | OR          | <b>+</b> 360        |              |  |
|  |  |  |               |                | TOTAL        |                     | OR   | TOTAL             |                     |             |                     |              |  |
|  |  |  |               |                |              |                     | f    | VOOIT, FEE        |                     |             | ADDIT. FEE          |              |  |
| (MOUT)   |  |  |               |                |              |                     | ے :  |                   | NOTE THE P.         | ;           |                     | 41           |  |
| U  |  | CLAIMS<br>REMAINING                            |               | HIGH<br>NUME   |              | PRESENT             | 1    |                   | ADUI-               | j           | CATE                | FOR          |  |
|  |  | AFTER .  |               | PREVIO         | USLY         | EXTRA               |      | RATE              | TIONAL              | 1           | RATE                | TIONA<br>FEE |  |
| Ē  |  | AMENDMENT                                      |               | PAID           | OR .         | ļ                   | 1 }  |                   | FEE                 | .           |                     |              |  |
| 202  | Total  |  | Minus ·       | 44             |              | =                   | 11   | ×25               | <u> </u>            | OR          | ×50                 | <u> </u>     |  |
| AMENDMENT  | Independent  | • : .  | Minus         |                | <u> </u>     | =                   |      | × 100             |                     | OR          | ×200                |              |  |
| [ ]  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |               |                |              |                     |      |                   |                     |             | 21.0                |              |  |
|  |  |  |               |                |              |                     | Ī    | + 180             |                     | OR          | +560                |              |  |
| • 1  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid Fox" IN THIS SPACE is less than 20, enter 20.  ADDIT. FE |  |               |                |              |                     |      |                   |                     | OR          | TOTAL<br>ADDIT, FEE |              |  |
| -  | K the Highest Hu   | mber Previously Pa                             | id For IN THI | s space is     | iess tha     | n 20, enter 20.     | . 4  | oon. Fee L        |                     |             | ADDII. PEE          |              |  |
|  | 14 AL - M P. L 4 A.F   | rtiber Previously Paid<br>ober Previously Paid | ・レイ ピーブ はしていり | S SPACE &      | · lace tha   | o 3 poles ~~        |      |                   |                     |             |                     | _            |  |